



121

PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/580,987
Filing Date	May 25, 2006
First Named Inventor	Zhiwen Zhang
Group Art Unit	1633
Examiner Name	Maria Gomez Leavitt
Attorney Docket Number	54-001021US

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	receipt acknowledgment postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Authorization to Charge Deposit Account Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Gary Baker, Reg. No. 41,595, Quine Intellectual Property Law Group P.C.
Signature	
Date	March 23, 2009

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, DC 20231 on this date:

Typed or printed name	Evelyn Gomez		
Signature		Date	3/23/09



CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the
United States Postal Service first class mail in an envelope addressed to:
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450,
on 3/23/09
QUINE INTELLECTUAL PROPERTY LAW GROUP, P.C.
By: Evelyn Gomez

Appl. No.	:	10/580,987	Confirmation No. 5846
Applicant	:	Zhiwen Zhang, et al.	
Filed	:	May 25, 2006	
TC/A.U.	:	1633	
Examiner	:	Maria Gomez Leavitt	
Docket No.	:	54-001021US	
Customer No.	:	22798	
Client Ref No.:		1021.2 US / NOV0627P	
Novartis Ref. No.:		4-33962/SCR	

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND REQUEST FOR RECONSIDERATION

Sir:

In response to the Office Action of January 22, 2009, please amend the above-identified application as indicated herein. Please reconsider the application in light of the amendments and remarks below.

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.